NEW HIRE

EMPLOYEE NAME

State of Maine Bureau of Human Resources

SSN

COMPLETE TOP OF PAGE 1 ALL OTHER SECTIONS FOR DEPARTMENT USE ONLY

BUSINESS TELEPHONE

BIRTH DATE

ADDRESS (Street, City, State, County, Zip)				SEX	HOME TEL	EPHONE	
				ETHNIC G	ETHNIC GROUP/RACE		
				0. White	☐ 0. White ☐ 1. Black ☐ 2. Hispanic		
				☐ 3. Asian	☐ 3. Asian ☐ 4. American ☐ 5. Not Indian Given		
				☐ 6. Other	6. Other		
PREVIOUS STATE EMPLOYMENT							
COMPLETE THIS SEC	CTION ONLY		UNDER	WHAT NAME			
IF YOU HAVE BEEN PREVIOUSLY EMPLOYED BY THE STATE OF MAINE							
BEGIN DATE	END DATE	DEPARTM	ENT	JOB	TITLE		
E	BELOW THIS IS FO	LINE AND OI OR DEPARTI	— . •		PAGE		
			··—·—·	_ · _ · _ · _ · _ · _ · _ · _ · _ · _ ·			
	1	POSITION A	SSIGNME	NT			
CURRENT HIR	E DATE	APPOINTM	ENT TYPE	AP	APPOINTMENT END DATE		
CERTIFICATION NUMBER		VETERANS PREFERENCE		MARITA	AL STATUS	TYPE OF HIRE	
CIVIL SERVICE	STATUS	ORG 1	ORG 2	0	RG 3	ORG 4	
POSITION NUMBER		JOB CLASS TITLE			JOB CLASS CODE		
SALARY INFORMATION							
PROBATION TYPE P		PROBATION BE	DBATION BEGIN/END DATES		SHIFT		
SALARY SPEC		SALARY GRADE			SALARY STEP		

AUTOMATIC SPECIAL PAYS

PAY NUMBER	PAY TITLE	HOURS	RATE/AMOUNT

IF THE EMPLOYEE'S SALARY IS REDLINED OR THE SALARY AMOUNTS CANNOT BE IDENTIFIED BY A SALARY SPEC, GRADE OR STEP, ENTER THE FOLLOWING SALARY INFORMATION

REDLINED SALARY		ANNUAL SALARY	BIWEEKLY SALARY	HOURLY RATE
Plea	ase Circle			
A ABOVE B BETWEEN				
U UNDER				
P PRORATED				

EMPLOYEE INFORMATION

DEPARTMENT NAME/PROC CO.	EMPLOYEE LOCATION/MCD CODE	DATE IN CURRENT DEPARTMENT
EFFECTIVE DATE IN JOB CLASS	ORIGINAL HIRE DATE	LONGEVITY DATE
EFFECTIVE DATE IN JOB CLASS	ORIGINAL HIRE DATE	LONGEVITT DATE
SENIORITY DATE	DATE NEXT PERFORMANCE EVALUATION	NEXT SALARY REVIEW

APPROVALS

DEPARTMENT	DATE	BUREAU OF HUMAN RESOURCES	DATE